Amendments to the Drawings:

The attached sheet of drawings include changes to FIG. 2.

This sheet replaces the original sheet depicting FIG. 2. In FIG.

2, the limit stop for the indexer piston has been indicated with the reference numeral 50.

Attachment: One (1) replacement sheet

REMARKS/ARGUMENTS

The claims are 1-4, 8-13, 18-20 and 22. Claims 1, 19 and 22 have been amended to better define the invention, and claim 21 has been canceled. The drawings have also been amended, and the specification has been amended in view of the changes to the drawings. Support may be found, *inter alia*, in the disclosure at page 7, second and third full paragraphs and in the original claims. Reconsideration is expressly requested.

The drawings were objected to under 37 C.F.R. 1.83(a) as failing to show the limit stop for limiting the exit of the indexer piston as recited in claim 15. In response, Applicant has amended FIG. 2 to indicate the limit stop for the indexer piston with the reference numeral 50, and has amended the specification to refer to that limit stop with that reference numeral. It is respectfully submitted that these amendments overcome the objections to the drawings, and Applicant respectfully requests that the objection on that basis be withdrawn.

Claim 21 was objected to as being identical to claim 8, and in response, Applicant has canceled claim 21 without prejudice.

Claims 1, 8-16, 18, 19, 21 and 22 were rejected under 35

U.S.C. §102(b) as being anticipated by *Haar et al.*, *U.S. Patent*No. 6,440,099. Claims 1-4, 8-12 and 18-21 were rejected under 35

U.S.C. §102(b) as being anticipated by *Neracher*, *U.S. Patent*Application Publication No. 2002/0055712.

In response, Applicant has amended claim 1, 19 and 22 to better define the invention and respectfully traverses the Examiner's rejection for the following reasons.

As set forth in claims 1, 19 and 22 as amended, Applicant's invention provides an anesthetic syringe having a slide valve, a feed piston that is longitudinally slidable within a carpule volume, and first and second hydraulic chambers. The slide valve has a slide valve pressure plate connected to the first hydraulic chamber with a front element protruding into the first hydraulic chamber in order to allow for haptic feedback of the pressure in the first hydraulic chamber. The slide valve is capable of closing or progressively opening an opening of a control hole between the first and second hydraulic chambers. The connection between the first and second hydraulic chambers is particularly suited for fine regulation of the movement resulting at the feed piston when the second hydraulic chamber is subjected to high overpressure.

Neither Haar et al. nor Neracher discloses an anesthetic syringe having the structure recited in claims 1, 19 and 22, as amended, or teaches the benefits that are achieved via that structure. Although the Examiner has taken the position that FIGS. 2 and 3 of Haar et al. fully disclose Applicant's anesthetic syringe, it is respectfully submitted that Haar et al.'s system is incapable of enabling a haptic feedback with the construction shown there. The practitioner using Haar et al.'s syringe in practice needs to press the button 32 so hard that the plastic connection at the connection bore between the two hydraulic chambers breaks. In this very moment, the button 32 snaps down in the syringe housing until the gas release valve 33 bangs against the bottom wall of the inner housing 23 of the syringe. In the very moment where the front edge of the gas release valve 33 hits the wall, no haptic feedback can be sensed at the button.

Contrary to Applicant's claims 1, 19 and 22 as amended, it is respectfully submitted that *Haar et al.* fails to disclose or suggest (1) a slide valve being capable of closing or progressively opening an opening of a control hole between the first and the second hydraulic chambers or (2) a second hydraulic chamber connected to the first hydraulic chamber so as to allow for regulation of the floor resistance. It is respectfully submitted that a "regulation" is to be understood as a

"continuous regulation". In contrast, the button in Haar et al. can distinguish only between "fully closed" and "fully open". As long as the plastic connection is not yet broken, the connection bore between the two hydraulic chambers is fully closed. In the moment in which the plastic connection part breaks, the button hits through until it bangs against the housing. In that position, the button is wedged under the top part of the outer housing 45. In this position, the bore is fully open.

To better distinguish over *Haar et al.* system, claims 1, 19 and 22 have been amended to clarify that the slide valve cannot only fully open and fully close the connection bore. Rather, it can "progerssively" control the bore as discussed at page 7, second paragraph of the specification.

Neracher likewise fails to disclose or suggest the anesthetic syringe recited in Applicant's claim 1, 19, and 22 as amended. Although the Examiner takes the position that FIG. 51 of Neracher discloses Applicant's anesthetic syringe, it is respectfully submitted that nowhere does Neracher disclose or suggest a slide valve pressure plate connected to the first hydraulic chamber as recited in Applicant's claims. In FIG. 51 of Neracher, only the front surface (shown pointing towards the top in the drawing) of the cylindrical part or actuation valve 118 can be understood as a "pressure plate"; however, this front

surface is <u>not</u> connected to the first hydraulic chamber as can be seen by the drawings which show the whole area being filled by hydraulic fluid as shown with little dots in the drawing. These little dots are even shown in the very small part or return valve 118, even between the springs there. In contrast, in the room where the spring for the button 119 is located in *Neracher* which is where the front surface of the cylindrical part 118 protrudes into, there are no dots and thus, there is no hydraulic fluid.

Nevertheless, to better distinguish over Neracher,

Applicant's claims 1, 19 and 22 have been amended to better

define what is a "pressure plate" so that these claims now recite

that the connection between the pressure plate of the slide valve

and the first hydraulic chamber serves to enable a haptic

feedback as discussed at page 7, third full paragraph of the

specification.

Accordingly, it is respectfully submitted that neither Haar et al. nor Neracher anticipates Applicant's claims 1, 19 and 22, as amended, or the dependent claims which depend directly or indirectly thereon.

Moreover, it is respectfully submitted that neither

Neracher nor Haar et al. render obvious Applicant's anesthetic

syringe as recited in claims 1, 19 and 22 as amended because

neither of these references make the pressure sensible at the user button. In Neracher, the pressure cannot be sensed at all. In Haar et al. in the short distance in which the pressure could theoretically be sensed, the practitioner pushes the button with too high forces, and Neracher intends to bridge this short distance as quickly as possible, which is why Neracher shows and describes only the two extreme positions in FIGS. 2 and 3.

Accordingly it is respectfully submitted that the claims are patentable over the cited references.

In summary, claims 1, 19, and 22 have been amended, and claim 21 has been canceled. The specification and FIG. 2 of the drawings have also been amended. In view of the foregoing, it is respectfully requested that the claims be allowed and that this case be passed to issue.

Respectfully submitted,

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Enclosure:

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Appendix - 1 replacement sheet

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 7, 2007.

Amy Kleir

APPENDIX